PTO/SB/81 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

POWER OF ATTORNEY CORRESPONDENCE ADDRESS INDICATION FORM

on Act of 1995, no persons are re	equired to respond to a collection of info	ormation unless it displays a velid OMB control number.
ATTORNEY Id INCE ADDRESS ON FORM Filing Date First Named Inventor Title Art Unit Examiner Name		10/634,977
	Filing Date	08/04/2003
	First Named Inventor	JOHN SWANT
	Title	RECEIVER TEST SYSTEM
	2618	
	Examiner Name	TUAN PHAM
	Attorney Docket Number	ÇING-121

I hereby revoke all previous powers of attorney given in the above-identified application.						
I hereby appoint:						
Practitioners associated with the Customer Number:		13				
OR	OR					
Practitioner(s) named below:						
Name		Registration Number				
		· · · · · · · · · · · · · · · · · · ·				
the discount	- it find about a court to to	mount all business in the ble	oited States Palent and			
as my/our attender(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.						
Please recognize or change the correspondence address for the	above-identified applica	ation to:				
The address associated with the above-mentioned Cur						
OR	and the state of t					
The address associated with Customer Number:						
OR The address associated with Customer Number.						
Firm or Individual Name						
Address						
City	State		Zip			
Country Telephone	Email					
I <u>am</u> the:						
Applicant/Inventor.						
Assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Signature Thursday	<u> </u>	Date	8-8-06			
Name Thomas M. Meiss		Telephone	404-236-5533			
Title and Company Assistant Secretary Conquiar Nireless. II, LLC						
NOTE: Signatures of all the inventors or assignees of record of the entiré interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
*Total of 1 forms are submitted.						

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.